PTO/SB/22 (08-03) Approved for use through 7/31/2006. OMB 0651-0031

PETITION FOR EXTENSI	of 1995, no persons are required to respond to a collection of the	Docket	Number (Optional) HO-P02005US0
	In re Application of Christoph	er J. Schofie	ld et al.
	Application Number 09/582,486	File	ed December 24, 19
	For MODIFIED DEACETOXY (DAOCS) AND X-RAY S	CEPHALOS TRUCTURE	
	Art Unit 1631	Examiner	M. L. Borin
	ovisions of 37 CFR 1.136(a) to extend the p	period for filin	g a reply in the above
identified application. The requested extension and	appropriate non-small-entity fee are as folk	ows (check ti	me period desired):
One month (37 C	FR 1.17(a)(1))	•	<b>\$</b>
X Two months (37	CFR 1.17(a)(2))	and a second of the	\$ 420.0
Three months (3)	7 CFR 1.17(a)(3))		\$
Four months (37	CFR 1.17(a)(4))		\$
Five months (37	CFR 1.17(a)(5))		\$
x A check in the amount Payment by credit care	nd the resulting fee is: \$ of the fee is enclosed.  Form PTO-2038 is attached.  dy been authorized to charge fees in this ar	onlication to a	ı Denosit Account
The Director is hereby overpayment, to Depo	authorized to charge any fees which may b sit Account Number 06-2375	•	•
	icate copy of this sheet.		
applicant	nventor. of record of the entire interest. See 37 CFF nent under 37 CFR 3.73(b) is enclosed. (Fo		96).
	inchit dilder of Of It of Tolloged. It is		
Štaten	r agent of record. Registration Number _		
Stater attorney o		45,546	
Staten attorney o  x attorney o  Registrat  July 23, 2004	r agent of record. Registration Number _ ragent under 37 CFR 1.34(a).	no Ca	tena
Staten attorney o  x attorney o Registrat  July 23, 2004  Date	r agent of record. Registration Number _ ragent under 37 CFR 1.34(a).	n Ca Sig	tena nature
Staten attorney o  x attorney o  Registrat  July 23, 2004	r agent of record. Registration Number _ ragent under 37 CFR 1.34(a).	Signo	Catena printed name
Staten attorney o x attorney o Registrat July 23, 2004 Date (713) 651-5144 Telephone Number	r agent of record. Registration Number r agent under 37 CFR 1.34(a). ion number if acting under 37 CFR 1.34(a)	Sign Gino Typed or p	Catena orinted name

Two Month Request for Extension of Time Under 37 CFR 1.136(a)
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER509324957US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 23, 2004

Signature:

MC/Q(Pamela Tincha) 07/26/2004 EABUBAK1 00000105 09582486

May 4000			U.S. P	atent an	nd Trademai	rk Office: U.S.	ough 7/31/2006. OM	COMMERCE		
Under the Paperwork Reduction Act of 1995, no persons are request.	uired to	red to respond to a collection of information unless it displays a valid OMB control number								
FEE TRANSMITTAL			Complete if Known							
CART CONTRACTOR CONTRA	•	Application Number				09/582,486				
for FY 2004					December 24, 1998					
Effective 10/01/2003. Patent fees are subject to annual revision.		First Named Inventor			Christopher J. Schofield					
		Examiner Name				M. L. Borin				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				1631				
TOTAL AMOUNT OF PAYMENT (\$) 420.00		Attorney Docket No. HO-P02005US0								
METHOD OF PAYMENT (check all that apply)	<del></del>	FEE CALCULATION (continued)								
Credit Money	1	-			**	LATION (CO	ntinuea)	•		
Card Order Other None	3. /	ADDITIO	ONAL	FEES						
Deposit Account:	Larg	e Entity	Small	Entity						
Deposit Account 06-2375	Fee	Fee	Fee	Fee	<del>·</del> .	F D				
Number	Code	(\$)	Code	(\$)		Fee Desc	ription	Fee Paid		
Deposit Account Fulbright & Jaworski L.L.P.	1051	130	2051.	65	-	- late filing fe				
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	- late provisio	onal filing fee or cover			
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	sh specification	n .			
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2.520	For filing a	request for ex c	arte reexamination			
	1804	920*	1804	920*		g publication o				
Charge fee(s) indicated below, except for the filing fee		920	1004	•	Examiner a		5 CUD - 9			
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Examiner a	g publication o action	T SIR aπer			
FEE CALCULATION	1251	110	2251	55	Extension	for reply within	first month			
1. BASIC FILING FEE	1252	420	2252	210	Extension	for reply within	second month	420.00		
Large Entity   Small Entity   Fee   Fee   Fee   Fee Description   Fee Paid	1253	950	2253	475	Extension	for reply within	third month			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply withir	fourth month			
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension	for reply withir	i fifth month			
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of A	• • •				
1003 530 2003 265 Plant filing fee	1402	330	2402		_	ef in support o	f an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145		r oral hearing	16			
1005 160 2005 80 Provisional filing fee	1451 1452	1,510 110	1451 2452	55		revive – unavo	lic use proceeding	·		
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665		revive - uninte				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501		2501			e fee (or reissu				
Extra Fee from	1502		2502	240	Design issu	· ·	<b>,</b>			
Total Claims 10 -252** = x = 0.00	1503	640	2503	320	Plant issue	,				
Independent 11 -11** - V - 0.00	1460	130	1460	130		the Commiss	sioner .			
Claims	1807	50	1807	50						
		180	1806	180	_	ocessing fee under 37 CFR 1.17(q)				
Large Entity   Small Entity   Fee	1806						ssignment per			
Code (\$) Fee Description	8021	40	8021	40	property (ti	mes number o	of properties)			
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))					
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37CFR 1.129(b))					
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385						
over original patent		900 1802 900 Request for expedited examination								
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		ther fee (specify)								
	1			line Fr	Doid	CURTO	FAL (2) (2)	420.00		
SUBTOTAL (2) (\$) 0.00  **or number previously paid, if greater; For Reissues, see above	Red	uced by E	oasic Fl	iing ree	: Palu	SUBTO	ΓAL (3) (\$)	420.00		
SUBMITTED BY (Complete (if applicable))										
		ration No		546		T	, , ,	7		
11 > 4 1		ey/Agent)		,546		Telephone	(713) 651-5144			
Signature						10040	1014 22 2004			

July 23, 2004

Fee Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER509324957US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 23, 2004